

**BEST AVAILABLE COPY****Supplemental Application Data Sheet****Application Information**

Application number::	New	<u>09/927,597</u>
Filing Date::	Herewith	<u>08/10/01</u>
Application Type::	Regular	
Subject Matter::	Utility	
Suggested classification::		
Suggested Group Art Unit::		
CD-ROM or CD-R??::	No	
Number of CD disks::		
Number of copies of CDs::		
Sequence Submission::	Floppy Disk and Paper	
Computer Readable Form (CRF)?::	Yes	
Number of copies of CRF::	1	
Title::	HUMAN SMOOTH MUSCLE MYOSIN HEAVY CHAIN	
Attorney Docket Number::	CYTOP048	<u>020552-007100US</u>
Request for Early Publication::	No	
Request for Non-Publication::	No	
Suggested Drawing Figure::		
Total Drawing Sheets::	27	
Small Entity?::	Yes	
Latin name::		
Variety denomination name::		
Petition included?::	No	
Petition Type::		
Licensed US Govt. Agency::		
Contract or Grant Numbers One::		
Secrecy Order in Parent Appl.::	No	

**Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Fady  
Middle Name::  
Family Name:: Malik  
Name Suffix::  
City of Residence:: Burlingame  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of Mailing Address:: 2884 Hillside Drive  
City of Mailing Address:: Burlingame  
State or Province of mailing address:: CA  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 94010

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: France  
Status:: Full Capacity  
Given Name:: Christophe  
Middle Name::  
Family Name:: Beraud  
Name Suffix::  
City of Residence:: San Francisco  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of Mailing Address:: ~~761 Tehama Street~~ 1100 Eddy Street, Apt. H  
City of Mailing Address:: San Francisco  
State or Province of mailing address:: CA  
Country of mailing address:: US

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Postal or Zip Code of mailing address:: 94103

94109

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Richard  
Middle Name::  
Family Name:: Freedman  
Name Suffix::  
City of Residence:: San Mateo  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of Mailing Address:: 1012 Shoreline Drive  
City of Mailing Address:: San Mateo  
State or Province of mailing address:: CA  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 94404

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Andrew  
Middle Name::  
Family Name:: Craven  
Name Suffix::  
City of Residence:: San Francisco  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of Mailing Address:: ~~4348 10th Avenue~~  
City of Mailing Address:: San Francisco  
State or Province of mailing address:: CA

1316 10th Avenue

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Country of mailing address:: US

Postal or Zip Code of mailing address:: 94422

94102

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Poland

Status:: Full Capacity

Given Name:: Roman

Middle Name::

Family Name:: Sakowicz

Name Suffix::

City of Residence:: Foster City

State or Province of Residence:: CA

Country of Residence:: US

Street of Mailing Address:: 1119 Nimitz Lane

City of Mailing Address:: Foster City

State or Province of mailing address:: CA

Country of mailing address:: US

Postal or Zip Code of mailing address:: 94404

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: James

Middle Name::

Family Name:: Hartman

Name Suffix::

City of Residence:: San Francisco

State or Province of Residence:: CA

Country of Residence:: US

Street of Mailing Address:: ~~3 Gaiser Court~~

70 Elgin Park

City of Mailing Address:: San Francisco

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State or Province of mailing address:: CA  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 94440

94103**Correspondence Information**

Correspondence Customer Number:: 22434

20350**Representative Information**

Representative Customer Number:: 22434

20350**Domestic Priority Information**

Application:: Continuity Type:: Parent Application:: Parent Filing Date::

**Foreign Priority Information**

Country:: Application number:: Filing Date::

**Assignee Information**

Assignee Name:: Cytokinetics, Inc.  
Street of mailing address:: 280 East Grand Avenue  
City of mailing address:: South San Francisco  
State or Province of mailing address:: CA  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 94080

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